

21074YP



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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/510,069	10/04/2004	1624	750	21074YP		20	2

DOCKETED

CONFIRMATION NO. 5612

210  
MERCK AND CO., INC  
P O BOX 2000  
RAHWAY, NJ 07065-0907

JUN 28 2005

FILING RECEIPT

CHRISTINE A. CUFF



Date Mailed: 06/22/2005

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please mail to the Commissioner for Patents P.O. Box 1450 Alexandria Va 22313-1450. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

**Applicant(s)**

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**Power of Attorney:** The patent practitioners associated with Customer Number 210.

**Domestic Priority data as claimed by applicant**

This application is a 371 of PCT/US03/10442 04/04/2003  
which claims benefit of 60/370,847 04/08/2002  
and claims benefit of 60/417,174 10/09/2002 \*  
(\*Data provided by applicant is not consistent with PTO records.

**Foreign Applications**

**Projected Publication Date:** 09/22/2005

**Non-Publication Request:** No

**Early Publication Request:** No

MATTHEW LEFF

JUN 29 2005

PATENT DEPARTMENT

**Title**

Inhibitors of akt activity

**Preliminary Class**

514

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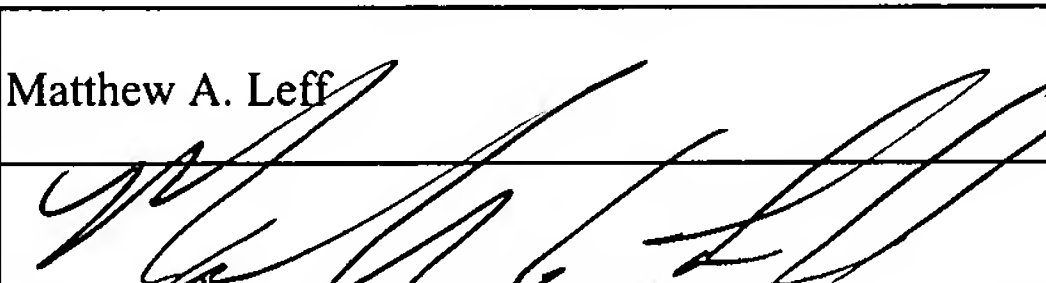
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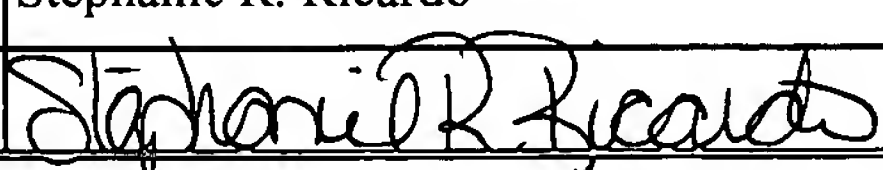
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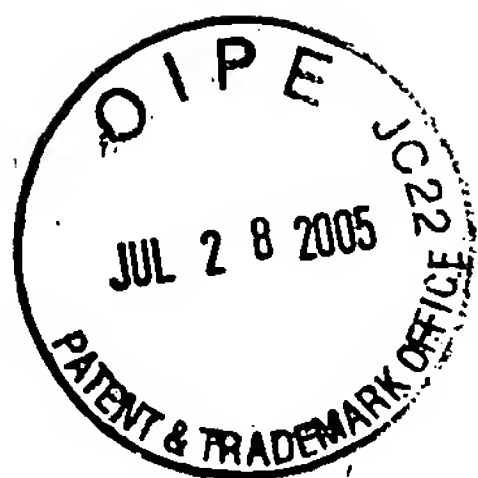
IFW  
1624

 <b>TRANSMITTAL FORM</b> (Use for all correspondence after initial filing)	Application Number	10/510,069	
	Filing Date	October 4, 2004	
	First Named Inventor	Mark T. Bilodeau	
	Art Unit	To be determined	
	Examiner Name	To be determined	
Total Number of Pages in This Submission	57	Attorney Docket Number	21074YP

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):
<b>Remarks</b> Supplemental Preliminary Amendment Copy of Filing Receipt for 10/510,069		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Name	Matthew A. Leff	Registration No. (Attorney/Agent)	50,149
Signature			Date 7/26/2005

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on this date: <u>July 26, 2005</u>			
Typed or printed name	Stephanie R. Ricardo		
Signature		Date	July 26, 2005



PATENT  
CASE NO. 21074YP

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

In re application of: MARK T. BILODEAU, ET AL  
Serial No. 10/510,069  
Filed October 4, 2004  
Group Art Unit \_\_\_\_\_  
Examiner To be determined  
For: INHIBITORS OF AKT ACTIVITY

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required.  
☐ The fee has been calculated as shown below.

CLAIMS AS AMENDED

(1)	(2) Claims remaining after amendment	(3)	(4) Highest Number Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims	* <u>20</u>	-	** <u>20</u> =	<u>0</u> X	\$50	= <u>0.00</u>
Independent Claims	* <u>2</u>	-	*** <u>3</u> =	<u>0</u> X	\$200	= <u>0.00</u>
Multiple Dependent Claims					\$360 ****	= _____
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT →						0.00

- \* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.  
\*\* If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.  
\*\*\* If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space.  
\*\*\*\* Add this fee only if application is amended to include multiple dependent claims (regardless of number) and no multiple dependent claims were originally filed.

Charge \$ 0.00 to Deposit Account No. 13-2755. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2755. A duplicate copy of this sheet is enclosed.

Respectfully,

By: Matthew A. Leff

Attorney \_\_\_\_\_ for Applicant(s)

Reg. No. 50,149

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Date: July 26, 2005

IN DUPLICATE